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# **Calgary General Hospital**

**1890 - 1955**



**Aerial View of Hospital**

***Sixty-five Years of Community Service***



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## DEDICATION

*This book is respectfully dedicated to the pioneers - those of early times, to whose hands, hearts, and hopes we owe a great debt, and to the pioneers of future endeavours in the field of Better Patient Care.*





Editorial Committee

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Many thanks to Sally Sinclair and Margaret Walker for their assistance in reorganizing and rewriting the hospital and nursing sections respectfully



## ACKNOWLEDGMENT

*This brief history was made possible through the help and co-operation of many who have been and are now connected with the City of Calgary General Hospital.*

*A special "thank you" to Mrs. A. E. Cross and Miss M. Pinkham for placing early records and reports at our disposal; to Mr. J. Barnes for his co-operation and assistance; to Miss Meehan, Librarian, The Calgary Herald, for the use of files and pictures; and to Mr. N. Farrow, of Farrow's Drug Store.*

*A grateful "thank you" for their efforts in compiling reports to the department managers, to the staff personnel, and to our hospital organizations and auxiliaries.*

*Thank you - one and all - and especially to those who helped us recall the colourful incidents of days gone past.*

The Editorial Committee







L. O. Bradley, M.D., Administrator



We have accumulated a fine history of community service at the Calgary General Hospital in the short span of 65 years, and can be proud of it. This publication is evidence of it. In it is a record of the work of many good people. They have in this short time built traditions that remain a challenge to us who serve today. We should be both thankful and humble.

The Staff Council and particularly the small committee that made this book lot of history possible have done another good service and must be highly commended. It is even more to be praised because the idea arose from within the staff in this our Golden Anniversary Year. For the Hospital Board and for the rest of us on the staff and in the community, our most sincere thanks. Your efforts and this excellent result are very much appreciated.

L. O. Bradley, M.D.  
Administrator





M. M. Dyck  
Business Manager



## CASE HISTORY OF THE CALGARY GENERAL HOSPITAL. 1890 to 1955

The present Calgary General Hospital, an institution of 600 beds, was officially opened on March 3, 1953. Standing on a rise of ground on the north east bank of the Bow River, the functional design of this modern edifice of glass, brick, steel and wood presents an extraordinary contrast to a view of Calgary's first hospital, established at 933 7th Avenue, West in October, 1890. The contrast is, however, no more extraordinary than the history of the Calgary General Hospital itself - a vital history of development, contribution, and progress - an enduring foundation for the breadth of vision of tomorrow.

### FIRST HOSPITAL ESTABLISHED

The firing of guns on November 12, 1884, signaled that Calgary was incorporated as a town. A fire department was established just in time to fight the \$100,000 fire that roared through the business section of the town in 1886. A police force was organized and the foundation for the city's park system was laid. Trans-continental passenger service on the CPR was welcomed by Calgary in 1886. In 1887, thirty subscribers received Calgary's first telephone service from the Bell Telephone Company of Canada. Electric lights went on in 1889.

Despite this evidence of progress, however, a hospital had still to be established in Calgary.

During the winter of 1885-1886 when young George Shaw, a CPR construction labourer, contracted typhoid, there was no place he could go for care and treatment. He died alone and neglected in a shack.

There was, at this time, a one-room log cabin with three cots, a pot-bellied stove, and a lantern, which served as an infirmary for the North West Mounted Police. From 1884 to 1887, under the supervision of Dr. Andrew Henderson, Calgary's first private medical doctor and acting surgeon for the NWMP, the infirmary was known as Calgary's first hospital. But this small, primitive infirmary could not hope to serve the growing populace of the straggling cowtown then called Calgary.

Stormy indignation on the part of citizens, aroused by the tragedy of George Shaw's death from typhoid, prompted Mayor G. C. King to call a meeting to consider the establishment of a hospital. As in the case in many tempests in a teapot, interest and indignation over lack of medical facilities soon evaporated and no action was taken until a dramatic incident occurred in Calgary four years later.

It was the fall of 1890. A Chinese, Jimmy Smith, alone and friendless, save for the visits of a sympathetic Anglican clergyman, lay dying in a bedroom at the old Royal Hotel. To that clergyman Jimmy Smith left his worldly goods - a suit of clothes and \$100 "to start a hospital."

The money was taken to Mrs. Cyren Pinkham.



Mrs. Cyrus Pinham

Mrs. Pinham, wife of the clergyman's superior Bishop Pinham, had lived all her life on the western prairies and she knew what a toll of human life had been taken during the period of pioneering — women dying in child birth, epidemics of smallpox and typhoid fever, and terrible accidents on the ranches and in the building of the new railroad.

She began at once to collect more money, and because she did not wish to limit the work to those of Anglican faith, persuaded the Mayor, G. C. King, to call a meeting of all who were interested in starting a General Hospital.

The result of this meeting was the decision to rent a building to be used for a Cottage Hospital. This was secured in October, 1890 — a small storey and a half frame house, located on Section 16 near today's Louise Bridge. It contained two rooms and a kitchen on the first floor and four small wards on the second. The rental was \$35 a month. Mrs. Nelson Hoade, Calgary's first trained nurse, and her husband, were put in charge.

## EARLY HOSPITAL TECHNIQUES

Characteristic of the period, hospital technique was rough and ready in this first Cottage Hospital. The dining room was used for surgery or meals depending on the need. There was a basin of carbolic solution in the entrance hall, but after the formality of hand immersion on arrival there was little attempt at asepsis as it is now understood.

For surgical operations the hospital supplied one probe, one pair of scissors, one forcep, one nasomouth and one Winchester of dilute carbolic acid. The surgeon supplied his own towels, gowns, gloves, aprons, etc.





General Hospital

The hospital was now established. Early in November 1890, Mayor King called a meeting of citizens who were interested in the welfare of the hospital to determine who would control, operate, and manage its financial problems.

The outcome of this meeting was reflected by an immediate application to the Government of the Northwest Territories for incorporation and the election of a Hospital Board with A. Rowe as Chairman. Other prominent citizens of the day to be elected to this first Hospital Board were G. C. King, A. D. Brimacombe, J. A. Loughheed, Bishop Pinkham, D. W. Marsh, Wm. Pearce, H. Sampson, Jas. Walker, and C. B. Rovineau.

At the Cottage Hospital itself the staff now consisted of Mrs. Nelson Hoade, Matron, Mr. N. Hoade, orderly and jack of all trades, Miss Martin, general servant for cooking, laundry and nursing assistance, and two doctors, N. J. Lindsay, M.D. and H. C. Mackid, M.D. The services of a second nurse were soon required and Miss McLean was taken on staff at a wage of \$35 per month.

## WOMEN'S HOSPITAL AID SOCIETY

It was during the month of November 1890 that Mrs. Pinkham called a meeting to organize a Women's Hospital Aid Society. Such a Society, she knew, was vital to the success and progress of the hospital. How else but through such a Society could funds for salaries and for purchasing of extra equipment be raised? Donations of food, linens, supplies, and all the other necessary items needed by a new hospital, could only be made and organized by an interested group of women who would work towards a common objective.

Mrs. Pinkham's hopes were dashed, however, at this first meeting of the Women's Hospital Aid Society. Mrs. Loughheed and Mrs. Allan were the only ladies who turned out for the occasion. Not one to be discouraged easily, Mrs. Pinkham called another meeting to be held at the home of Mrs. J. D. Lafferty on the afternoon of November 11, 1890. This time forty-seven enthusiastic women joined up to form the Society. Mrs. Pinkham had made sure they would. She had had the clergy of the town advertise the meeting and its purpose from the pulpit.

These pioneer women of Calgary—Mrs. Pearce, Mrs. Mackay, Miss Myer, Mrs. Marsh and Mrs. Perley, to mention a few—under the leadership of Mrs. Pinkham, were largely responsible for hospital organization at that time, building the foundation for the Calgary General Hospital of today.

They sewed for hours on end to provide sheets, drawsheets, pillow cases, towels, quilts, gowns and other linens for the hospital. They cooked and donated vegetables, plum puddings, chicken, eggs, fruit and other foods. They gathered and contributed cushions, curdies, chairs and other articles of furniture. And, in a period when settlers all beginning life in a new country, struggling for a living and future, could ill afford to spare a few dollars to donate to the hospital for equipment, the ladies of the Women's Hospital Aid organized suppers and dances to raise money for this purpose.

These suppers and dances, organized to raise money for the hospital, were no easy job. Most of them were held in Hall's Opera House and the first chore was to clean the hall with water carried in pails from a well across the street. Hot pointings by the boilerful, and home-baked ham, roast turkey and pie were served at these suppers. It is now a matter of history that Mrs. Pinkham was known to carve 14 turkeys and make pies to the tune of 15 pounds of butter for these affairs.

## THE CALGARY GENERAL HOSPITAL HAS PROSPERED

When the first Calgary General Hospital Board report, published in December, 1898, was presented for the information and guidance of hospital subscribers and friends, it showed an admission total of 123 patients, treated mainly for typhoid fever and pneumonia. The financial statement listed monies raised by the Women's Hospital Aid to be entertainments \$351.12, donations \$182.40, church offerings \$264.08. Private subscriptions amounted to \$820.00. Income from patients totalled \$1,348.17.

The first Board report also noted that the want of hospital accommodation must engage the attention of the new Board for it was impossible to accommodate all applicants in the present building. Several times throughout the year patients had to be turned away for lack of room, and in many instances patients convalescing were put to inconvenience to make room for incoming patients.

## MOVE FROM COTTAGE HOSPITAL TO NEW SITE IN 1895

In 1892, the directors of the Hospital Board had hoped that during the year they would be able to start and finish a new hospital building. Owing to the stand that the Dominion Government took, however, they moved regretfully that their efforts had failed.

It was not until 1894, that the Hon. T. M. Doherty, Minister of the Interior, laid the cornerstone for the new hospital on land that had been acquired at 12th Avenue and 6th Street East.

1895, however, was the banner year. For on May 22, 1895, the new hospital building was officially opened with a bed capacity for 250 patients. Distinguished visitors pronounced it to be one of the finest hospitals of its size that they had ever visited. And the Women's Hospital Aid Society, not only fully furnished the hospital from cellar to garret at great cost, but they also finished and furnished the model operating room.

Due to this operating room many surgical operations were performed during 1895 that, had it not been for these new conveniences, would have necessitated sending patients to Eastern cities at great expense for treatment.



General Hospital - I

Miss Mary Eden Birkes, a graduate of the Winnipeg General Hospital, and the first Matron of the Calgary General Hospital, reported in 1895, that since the opening of the new hospital, the work had increased so far that where the nursing staff had to be increased to two pupil nurses and two probationers. She stated that a Training School, with these four women, had therefore been established.

### FIRST HOME CARE PROGRAM

In the sixth annual report, published in 1896, a new departure for the hospital is noted: sixteen patients were treated at home by private nurses from the hospital at a total charge of \$182.00. This was, undoubtedly, the first home care program of its kind in Canada.

During this period, too, the General Hospital II enjoyed much good will from the citizens of Calgary. Donations of food, clothing, furniture, and even trees and flower pots arrived at the hospital. The Bell Telephone Company provided free use of a telephone. G. C. King contributed free use of a post office box. The Calgary Water Power Company provided a light over the front steps. Newspapers in the province were sent to the hospital regularly free of charge.

In 1897, the Board recommended that patients from outlying districts contribute more liberally toward the cost of hospitalization (a step finally taken in 1955). The average cost of treatment per day was 98.9 cents. Typhoid fever was still the most prevalent disease, but alcoholism had now superseded pneumonia in the list of treatments for the year.

Some interesting facts revealed in the account of receipts and expenditures for 1898 are:

Receipts		Expenditures	
Donations	\$ 574.45	Salaries	\$2167.95
City of Calgary	500.00	Fuel	471.95
N.W. Territory	871.97	Light	230.11
Dominion Government	339.30	Food	1416.04
Refund on Cod	6.50	Ice	45.00
	\$2291.22	Postage	14.60
Deficit	2054.43		
	\$4345.65		\$4345.65

In 1899, the Board of Directors drew up a charter and by laws governing operation and administration of the hospital. Some of the regulations were:

1. Board to consist of 12 members, elected annually from those supporting the hospital.
2. Donations of \$50.00 or more entitle donor to a life membership.
3. The City to contribute no less than \$500 per annum towards upkeep.
4. Insane and lunatics, as such, to be denied admittance.
5. All visitors required to sign a guest book.
6. Rate for a private room set at \$1.50 per day (this did not include liquor, charge for which was additional).

## NEW MATERNITY WING AND NURSES HOME

1897 was the year when the maternity ward was used so frequently that the Board recommended that a separate maternity cottage and nurses' home be built for the welfare of the hospital. It was suggested that the Women's Hospital Aid Society would come to the assistance of the Board in this endeavor.

Built at a cost of \$8,000, the Society raised through garden parties and balls, \$4,000 towards the building of the maternity wing and nurses home. The cornerstone was laid by Mrs. Parkinson, president of the Society, on September, 1899. In July of 1900, the new building was officially opened.

And so the century turned.

## 1900

The General Hospital II was expanding and so was Calgary. In 1900, the Calgary Gas and Water Works Company system was purchased by the city. The next year, the city limits were extended to take in the grounds of Victoria Park. In 1910, also, the Hospital Board asked the Federal Government to consider creation and maintenance of a tuberculosis patient hospital for the benefits of strict Calgary's named avenues were assigned numbers, which they still bear in 1964. That same year, Calgary received natural gas service.

Despite these signs of progress in the early years of the 20th century the high incidence of typhoid fever in the district still persisted, making it necessary to erect an isolation building. The small, temporary building erected by City Council was not satisfactory.

The President's report for the year 1905, the fourteenth annual meeting of the Hospital Board, states that a new maternity wing had been completed and now was in working order. Buildings of the new laundry and Isolation Hospital were finished but still required furnishing.

To keep pace with the growing needs of the City and surrounding country, it was suggested at this time, too, that a new private ward wing should be built.

By 1906, reports stressed the need for expansion in all departments so emphatically that a larger, newer hospital was deemed to be an absolute necessity.

Land on the north bank of the Bow River, obtained by the late William Pearce, well known Calgary pioneer, was granted in 1908 by the City Council and the Dominion Government for construction of a new hospital.

## THE "OLD GENERAL" III

The "Old General", located at the present site of the Calgary General Hospital, was opened for public use on February 1, 1910.



General Hospital III

The population of Calgary at this time was 50,000 and realizing the need for more modern methods, if the hospital was to serve the fast-growing city adequately, new functional systems were inaugurated from the start.

For example, during the early days from 1880 to 1910, when the Cottage Hospital, on 7th Avenue West and the General Hospital II on 12th Avenue East were in use, there was no Maintenance Department. The Cottage Hospital had been heated by a hot air furnace, and the General II by a hot water heating system employing two cast iron sectional type boilers. These heating systems were cared for by a janitor or porter assigned to these duties. Fired by wood, coal, and some gas from the Bow River Field in high pressure boilers at the opening of the hospital in 1910, it was necessary to engage qualified engineers and firemen to care for the boiler and also carry out the maintenance work from that time forward.

Other changes in the running of the hospital in 1910 involved the laundry. Operated by a power driven line shaft which ran to one 42" x 84" washing machine, one 42" x 54" machine, and two small extractors, the staff also employed two manually operated presses. This department had a foreman, a washerman and eight girls, three of whom operated electric hand irons. A far cry from the former laundry where soiled linen was deposited in a huge iron tank, thoroughly boiled in diluted lyeol, rinsed well then placed in small tubs. Under this method, previous to 1910, a Chinese laundryman, applying lots of elbow grease to both linen and corrugated scrub-board, hung the finished linens outside to freshen and dry, while other Chinese, armed with a stove-heated hand-iron, completed the job.

## DIETARY DEPARTMENT

In the kitchen, the Dietary Department, twenty people were on staff to take care of the food preparation and service. A battery of gas stoves lined the walls, collecting grease and dust which started many small fires. Buckets of sand were kept handy for these emergencies, however, and conditions were very much better than those at the old hospital where two Chinese cooks had done all the work.

When the Calgary General Hospital, opened in 1910, rates, chargeable by the day, amounted to \$1.00 in the General Ward, \$3.50, depending on the location, for a Private Ward, and \$1.50 per day in Maternity.

Incorporated in the amended Charter and By Laws of the new hospital was the rule that no physician should, except in urgent cases, attend patients between the hours of 12:30 p.m. and 2 o'clock.

Noted, too, at this time is the Matron's additional title of Lady Superintendent. In both capacities she was required to be an efficient nurse, a first-class housekeeper, and adept at managing the staff, public, and doctors with tact and discretion.

It was at this time that the old edifice of 1905 became the badly needed isolation wing.

## STORY OF THE LABORATORY

In 1912, an important development at the Calgary General Hospital was the establishment of a Department of Pathology. As the entire history of this Department reflects the growth of a large service from very humble beginnings it shall now be told here in its entirety by Dr. Elhott, in charge of the Department of Pathology at the Calgary General Hospital, at the present time.

Dr. Rosamond Leacock was the first Pathologist in this area for many years. In the early days a pathologist was a physician who had taken some extra training in this new science. At first they almost invariably worked alone in one room, and it was from these beginnings that laboratory services date in Calgary. Dr. Leacock was appointed to the staff in 1912. She was a graduate of the University of Toronto Medical School and acted as a part-time Pathologist at the Holy Cross Hospital while maintaining a private laboratory on 17th Avenue and 4th Street West.

In the old General Hospital III she had one room where she carried out the laboratory tests of the day, performed her own wash-up of equipment, sterilized her own materials and distilled the water for laboratory use. At that time the large number of commercial preparations for laboratory use were not on the market as they are today and Dr. Leacock must have been very resourceful in providing and preparing her own materials. She kept the library, glassware and stock in a shed at the back of the hospital. At the same time all the City milk and water supplies were tested for purity and safety in her small laboratory at the Calgary General Hospital. She had no secretarial help and wrote out and sent her own reports.

Many new services were instituted during her time. When she first arrived no blood transfusions were used in treatment. However, before she left a start had been made on making blood for direct transfusions. One day, in the reception, Dr. Leacock found it necessary to train an assistant, and when she left to work in Toronto the staff consisted of one Pathologist and one assistant.



View of laboratory in 1920's

Dr Leacock was replaced in 1928 by Dr Lola McLatchie, also a graduate of the University of Toronto Medical School. Like Dr Leacock, she maintained her own private laboratory as well as directing the Calgary General Hospital laboratory part time.

With the steady growth in Clinical Pathology the members of the staff and size of the laboratory grew. The small one-room laboratory was replaced by what had been a larger Typhoid Ward on the first floor near the back entrance of the old hospital. In subsequent years two adjoining rooms, previously used for mental patients, and an adjoining verandah were added. The laboratory remained in these quarters until the new General Hospital was opened in 1953.

With the organization and formation of the Canadian Society of Laboratory Technologists in 1936, the technical staff was gradually filled by trained personnel. By 1949, the entire laboratory staff consisted of a part-time pathologist, 9 technicians, a ward maid, and 2 stenographers.

The type and complexity of equipment steadily increased and many new tests were carried out. For example, frozen tissue sections were made for fast diagnosis of tumours, and these were later largely replaced by paraffin stained sections. The older organization of the Direct Blood Transfusions was replaced by a Blood Bank, operated under the auspices of The Canadian Red Cross Society. With the introduction of commercially prepared products the need for laboratory animals diminished, and an animal room of the old type no longer exists. Mr Fred Taylor, still a member of the hospital staff in the Stores Department, looked after the animals for many years.

From the early days of the department milk and water supplies of the region had been tested. However, shortly before the arrival of the present Medical Officer of Health, Dr W. H. Hill in 1953, a laboratory was set up at the Glenmore Dam to test water supplies on the spot. At about this time, Dr Hill set up an industrial laboratory in the City Hall where the milk supplies were tested, and these two laboratories still function.

From the days of Dr Leacock until just prior to the last war a major role was played by the laboratory in testing specimens for the City Health Department to detect contagious diseases. This work was very laborious since it involved examination of scores of specimens taken from contacts whenever an outbreak of infectious disease occurred. Much is owed to the directors of the City Health Department for the freedom which Calgary has enjoyed from epidemics of serious nature. The reduction in the number of epidemic infectious diseases, such as diphtheria, has left that phase of work in the laboratory a mere memory. While careful testing and searching for infectious diseases is still carried out on a considerable scale, the success of these manoeuvres is a matter of practical concern to all the citizens of Calgary.

During the early part of the Second World War the General Hospital Laboratory carried out all the laboratory work for military personnel until the laboratories of the Colonel Belcher Hospital were opened.

It is evident that the Calgary General Hospital has played a large part in initiating and developing services which are now common place in this city.



In March 1953, the laboratory services were set up in the new and well-designed laboratories of the Calgary General Hospital. There, for the first time, the laboratory had adequate facilities and equipment with separate rooms for washup, sterilizing, media preparation, refrigeration facilities, and departmental units for special red investigation in the various branches of Clinical Pathology. Where formerly Haematology, Biochemistry, and Serology were all carried on in one large room they are now situated in separate sections, each with their own special equipment and specially-trained personnel. New technical and analytical procedures have been added systematically, until this laboratory now compares with the laboratories of our major hospitals in Canada. A separate department for Electroencephalogram wave study was set up in 1964, and to this an Electro-cardiology Division has been attached.



The Laboratory Today

With the great increase in the amount and scope of work passing through the laboratory the staff increased from 15 in 1953, to a staff of 30 by 1954. Dr. McLatchie resigned in 1953 and her duties were taken over by the first full time Pathologist Dr. G. B. Elliott. He was trained in the University of Durham, England, in the Winnipeg General Hospital and in the American Army Institute of Pathology (Washington, D.C.), in Clinical Pathology.

In the last two years the volume of work in the laboratory has almost trebled. In the year 1954, more than 100,000 laboratory tests of varying degrees of complexity were carried out.

### 1913

1913 was an eventful year. At the annual meeting of the Women's Hospital Aid Society Mrs. Pinaham resigned her post after twenty three years spent in valuable service to the three hospitals which were richer in every way for her interest. Mrs. N. Black was her successor. Calgary's population had increased to 70,000.

And it was during this year that the city purchased a site along 16th Avenue N.E. for a tuberculosis hospital, now known as Mountview Home, adding a smaller building to accommodate cases of smallpox. Both of these annexes came under the administration of the General Hospital.



Mountview Home - T.B. Hospital in 1913



Smallpox Hospital 1913

## PRESIDENTS OF HOSPITAL BOARD

An imposing list of pioneer personalities in the West are credited with having been past presidents of the Hospital Board in the Board's annual report of 1913. D. W. Marsh served two terms in 1890-1891. James Walker followed in 1892. Then came W. H. Cushing in 1893-1894, Amos Rowe, 1895; W. H. Cushing, 1896. Edwin R. Rogers, 1897. W. H. Cushing served again as president of the Hospital Board from 1898 to 1903. A. E. Cross succeeded Mr. Cushing from 1904 to 1906, followed by A. Allen in 1907. Continuing in order from that time were J. Cardell, 1908; Hon. W. H. Cushing, for his tenth term, 1909; I. S. G. Van Wart, 1910-1911; Col. James Walker, 1912, and W. H. Berkenshaw, 1913.

## IMPROVEMENTS MADE IN 1913

In the year 1913, many improvements were made at the hospital. Screens were placed on all the windows. An ice-making refrigerator plant was installed, as well as an incinerator. The Women's Ward and all private wards were re-decorated. Gas was installed throughout the hospital. Additionally, apparatus for the X-ray Department, typhoid sterilizers and men dressing sterilizers, were put into service.

Another important step during this period was the refinement of the original X-ray machine. Mr. E. S. Hoare, the first man to operate a diagnostic X-ray apparatus in London, England, was in charge of this innovation which seems to have been the only stationary apparatus at the General Hospital for ten years. It was assembled in 1913 in the old hospital building in a room adjacent to the operating suite.

Pioneer physicians in the frontier community of Calgary were quick to recognize the potential value of the discovery by Roentgen of the X-ray in 1895. The first local application of this discovery to the diagnosis and treatment of human ills was effected at an early stage when Drs. H. G. and L. S. Macleod installed one of the original "static" machines in their offices in 1908, only thirteen years after the initial discovery in Germany. This machine was primitive as were all machines of its day, but it was not succeeded by other installations in the City until the aforementioned installation in 1913.

A large portion of land in front of the hospital was plowed in the fall to grow vegetables during the coming year.



Old Gate Entrance to General Hospital

In 1913, the number of operations performed was 1,869. 290 tonsilectomies and 286 appendectomies headed the list. Deaths at the hospital totaled 167 while births reached the number of 306.

## 1914 - 1915

1914 was notable in the history of the Calgary General Hospital III as the year the Purchasing and Stores Department was established. Prior to 1914, food supplies were bought on a day-to-day basis from town vendors. Now, however, a long narrow building was constructed on the site of today's Blue Room and was used for a butcher shop and a place for bulk storage. Supplies were brought to the main building in a wheelbarrow by a Chinaman named "Old Sam."

For Calgarians the year of 1914 was to bring an oil boom, sparked by the success of the Dugman Discovery well. It was also the year that the First World War was declared. And in this connection, here is a list of members of the medical staff who were absent from the Calgary General Hospital III in 1915.

Drs. Berch, F. T. Campbell, F. C. Clarke, Costello, Cook, Dunlop, Gunn, Hazard, Hewitson, Geo. Johnston, H. H. Johnson, L. S. Mack and MacDonald, McAllister, McGill, McGuffin, McLaughlin, Mayhood, Mewburn, MacRury, Mossis, O'Callaghan, J. Reid, Robinson, Selby, Shillington, Stewart, J. D. Stewart, J. M. Taylor, A. H. Taylor, Richardson, and Samson.

During this period, possibly due to the need for doctors on the home front, the hospital began an interne service. Dr. I. H. Brodie and Dr. F. H. Fish, present members of the medical staff, were among the first interns. This service was discontinued in 1920, however, and was not re-introduced until 1940.

## PHARMACY - 1916

Like the other hospital departments, the Pharmacy started in a modest way--a small room in the old General on 12th Avenue East with a part-time pharmacist. Pharmaceutical supplies were bought by contract from one of the city drug firms. Under this contract the firm was required to equip a room in the hospital as a pharmacy and to have a qualified pharmacist in attendance during the specified hours, 11 a.m. to 2 p.m., during which time all the pharmacy requirements of the hospital had to come in and be met.

By 1916 this procedure was no longer practical. It was at this time that the Board decided to operate the pharmacy with a full-time pharmacist, Miss A. Simpson of Innisfail in attendance.

To complete this record of the Pharmacy, Mr. Noel Farrow, presently owner of Farrow's Drug Store, was engaged as pharmacist in 1920. One of his first duties was to correct certain practices that had developed during the period the pharmacy was operated under contract, and could not continue in the hospital department.

From 1920 to 1925, student nurses spent a part of their training period in the pharmacy getting first-hand knowledge of how drugs are compounded and prescriptions filled. This training was dropped, however, when *Materia Medica* was introduced into the course of students of the school. In order to stimulate interest and a high standard of efficiency in this course Mr. Farrow was able to get the Alberta Pharmaceutical Society to grant a \$50 medal to the student with the highest standing in the subject. This medal is still granted annually.

Today, welfare cases under City care receive their prescriptions from the Hospital Pharmacy, as do children in the City Shelter.

To sum up the history of the Pharmacy, as the demands for service grew so the pharmacy gradually expanded in space and staff. At the present time there is a chief pharmacist, one assistant, two registered pharmacists, a pharmaceutical intern, and a clerk.

Miss Rupp, who succeeded Miss P. McCaffery, is the present Pharmacist. Miss McCaffery succeeded Miss D. Whiteman to this position.

## 1917

"Get efficiency and you have economy," was the watchword in 1917. To this end, economic methods which were adopted at the hospital were individual serving of bread, butter, sugar, etc. in the wards, regular inspection of garbage cans, substitution of fresh vegetables grown on hospital land for canned vegetables during autumn months, extravagance in the use of gauze and all medical and surgical supplies by doctors and nurses was to be prevented where possible, soiled gauze and bandages were to be washed, re-sterilized and re-used, absorbent cotton replaced by cheaper non absorbent where practical, non official medicines cut out as much as possible, and the amount of stationery and printed forms used were to be reduced and all waste of them forbidden.

A new poultry house was constructed during this period for 1,000 hens, and rootcellars with a capacity of 1,500 bushels of potatoes were added. In nearby pens a few pigs and sheep were kept for use in the laboratory.

1917 saw the organization of a Social Service Department under the supervision of Miss Ash of the V.O.N.

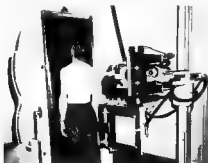
## HOSPITAL TAKEN OVER IN 1919

1919 was another memorable year in the history of the Calgary General Hospital. Until this time the City had had little to do with the hospital. Controlled and operated by a Board, expenses were met by patient fees, by public and private subscriptions. In 1919, the Board was dissolved and the hospital was taken over as a civic department with the Mayor as chief administrator, assisted by a hospital manager. Hospital deficits and capital expenditures became a charge to the mill-rate.

## X-RAY DEPARTMENT — 1919

The first existing records of this department are dated September 1919, and these reports were signed by Dr. J. W. Warren, the first Radiologist in the institution. It is uncertain when Dr. Warren commenced his duties in the hospital, but he served until the fall of 1923 when he moved to Victoria, B.C. being succeeded by Dr. W. H. McGuffin. At this time the department boasted of two machines, one a permanent installation with a mechanical rectifier, the recognized "latest" in those days, which deeply impressed the patients with its pyrotechnics and awe inspiring noise while operating. The other machine was an unshielded mobile apparatus with open high tension circuits. By this time the department had been moved to the ground floor of the hospital, across the corridor from the pathological laboratories. Mr. Hoare was the technician until 1919.

when Mrs. Murray succeeded him in these duties being in turn succeeded in 1923 by Miss Donald, now Mrs. Percy Traver, wife of the Assistant Police Chief. Miss Moon also assisted in the duties of department technician.



X-Ray Machine

Dr. McGuffin provided the professional radiological services required until 1934, when he was succeeded by Dr. Walter S. Quint, who provided similar services until his decease in the late spring of 1948. Miss Shaw, Miss Moon, and Miss Fivis Spooner were the radiological technicians until 1948. Miss Spooner beganning her services in 1941.

During the period of Dr. Quint's service the department was moved to the ground floor of the new Perley Wing, expanded and the old machine replaced by a new, more modern apparatus, ray proof and shock proof, with an up-to-date vacuum tube rectifier. During this interval the department was, in addition, offering medical physiotherapy services and had the responsibility of the technical production of electrocardiograms required by the growing institution.

In 1947 a secondary stationary X-ray machine was installed, augmented by an additional mobile unit to replace the out-moded previous unit. Since its inception the department had regularly augmented its diagnostic radiological services to the community with new and proven techniques, and rendered a complete service in its day. However as late as the middle of the 1940's the radiological technicians were doubling as secretaries and at no time did the department require the full time services of a diagnostic radiologist.

Dr. K. D. Symington succeeded Dr. Quint upon his death, and subsequently obtained as associate Dr. B. J. Murphy in March 1951. With the move to the new hospital building came a considerable elevation in the status of the Department of Radiology—from the basement to the second floor. The department now has available for diagnostic radiological examinations four stationary modern units, three mobile apparatus and a fluoroscopic unit for admission chest films — a further service instituted soon after moving into the new building, the

apparatus being donated by the Alberta Tuberculosis Association. Mr. H. S. Knithrens has been supervising technicians since the fall of 1948, ably assisted by Miss Helen Grassica and a technical staff now numbering five R.T.'s and four students, and the secretarial staff of three full-time stenographers.

The ever increasing demands of the community for diagnostic X-ray facilities resulted in a full time specialist diagnostic service being offered by the radiologist staff in July 1954. The scope and variety of the examinations available have increased as space and time in the department expands an average of over two thousand cases monthly.

With the growth attendant on a booming community came the necessity for a new, independent physiotherapy department, this move being initiated on January 15, 1953, when Miss Sprent was employed as physiotherapist, a separate department subsequently developing under her direction. Similarly the electrocardiography was separated from the technical services of the department of Radiology.

### HOSPITAL EMPLOYEES' FEDERAL UNION No. 8 — 1919

This union was formed on October 15, 1919, and received its charter from the Trades and Labour Congress of Canada. At this time the membership totalled 40, under the leadership of George Sykes, President, James Thompson, Vice President, and Frank McCann, Secretary-treasurer.

Throughout the years many worthwhile benefits have been realized and written into an agreement which aids the entire hospital staff. Some of these are as follows:

1. Sickness and non-occupational accident insurance came into effect in 1932.
2. The civil employees' pension scheme was inaugurated in 1935.
3. Group insurance plan with Blue Cross was started in 1948.
4. The Medical Service Incorporated scheme came into being in 1954. At

present with a membership of approximately 400, the Union has direct affiliation with the C.I.E.F., Calgary Trades and Labour Council, The National Union of Public Employees, and the Trades and Labour Congress of Canada.



Al Brindley

Through Al Brunton's efforts the National Federation of Civic Employees was formed and, as president of the Union for ten years, Mr. Brunton did much to improve the wages and working conditions of the lay staff. A. Brunton joined Maintenance in 1923 and served in this Department until his death twenty years later.

### HOUSEKEEPING DEPARTMENT IN 1920

Checking the hospital records the first mention of the Housekeeping Department occurs in 1920. Mrs. Turner was the Chief Housekeeper at that time and a six-and-one-half day shift was the practice.

Shortly after Mrs. Turner's term the housekeeping staff came under the supervision of Miss Tweedie, head seamstress, and the nursing supervisor on each ward. During this period maids were paid \$35 a month, plus room and board in houses rented by the hospital. This wage was later raised to \$45 a month, but pleasant accommodation at this time could be obtained for \$10 a month. All wards were hand scrubbed and the staff was responsible for all hospital dishwashing. There were no men in the department. Ernie Rutz, who served for twenty years at the Isolation Hospital, however, later became the first male supervisor in this growing service.

To bring the record up to date, since moving into the present hospital, Calgary General IV, the Housekeeping Department has been under the direction of a full-time executive housekeeper, Miss R. Crawford.

### MANY YEARS OF SERVICE

It was in the 1920's too, that many well known personalities in the hospital of today were added to the roster.

James Barnes, Alex Middleton, Al Brunton, Miss Von Gruentgen, Mrs. L. Sullivan, Ian Douglas, Miss M. MacDonald, Albert Jones, Fred Taylor, Bill Patterson, Miss E. Roos, Miss E. Forbes, Miss B. Symons, George Cogswell, Mrs. Sykes nee Cox, Mrs. K. Weimer, to name a few.

When the hospital was taken over by the City in 1919, James Barnes, Mr. Partin (who recently retired as City Treasurer), and a few others on the City Hall staff looked after the accounts of the hospital. In 1923 Mr. Barnes came over to the General Hospital, III as business manager, a position which he held until his retirement in 1952. In the depression years Mr. Barnes' task was a heavy one, but he saw the hospital grow from a small unit until construction was in progress for the present building. James Barnes was assisted by Dr. Hill, who acted as a part-time Medical Superintendent until Dr. Henslip came in 1946.

Robert Newstead, assistant manager to Mr. Barnes, retired in 1951.

Other brief profiles on some of the aforementioned persons reveal Alex Middleton joined the hospital staff in 1923 as chief engineer, a position he held until retirement in 1955. Mr. Middleton saw the power plant develop from the original small unit under the old laundry to its present up-to-date modern plant. Miss Von Gruentgen, a graduate of the General's School of Training in 1921, has held many positions at the hospital through the years. Mrs. Sullivan joined the Housekeeping staff in 1921, became supervisor of the department, and has now held the position for 18 years.



# OUR SENIOR STAFF



Miss E. Bost



W. Peterson



Mrs. E. Farber



G. Cogswell



Miss B. Symon

**25  
years**



A. Jones



Miss Yess Greening



Douglas

**and  
more**



Miss K. Winner



F. Taylor



Mrs. MacDonald R.N.



E. Rutz



Mrs. I. Sullivan

Ian Douglas came on staff in the Purchasing Department as a book-keeper in 1928 and upon the death of Mr. B. Ellison in 1949, became purchasing agent of the General, Bill Paterson, in charge of Maintenance at the present time, joined the engineering staff in 1919, on staff in 1926, Miss Forbes was the switch board operator, secretary to Mr. Barnes, in charge of medical records, and now holds the title of Medical Records Librarian.

Fred Taylor, on staff in 1914 as the orderly overseer, moved to the Stores Department in 1919. The record has it, too, that Fred Taylor, while serving as operating suite orderly is reported to have been directly responsible for the acquisition of a uniform dress. For having been out later than usual, one stormy evening, he came on duty the next morning with muddy shoes. This aroused the ire of Dr. Mewburn, Chief Surgeon at that time who upon reporting the matter to Miss Smith, the Matron, suggested that the orderlies' dress should be regulated. No one was more surprised than Dr. Mewburn when, three days later, Fred Taylor reported for duty in a white shirt, white jacket, white trousers, white shoes and a black tie. The tie and jacket have now been replaced by a more comfortable short-sleeved shirt, and white shoes are no longer a regulation.

The present Head Orderly is Albert Jones. He has been with the hospital for 26 years. Mr. Mansfield, his assistant, has 23 years service. Other personnel in this department, including the head operating room orderly Jerry Allen and oxygen therapist Howard Sadler have served the hospital for many years also.

In this connection incidentally, it is interesting to note that until Mr. Pophie was appointed Senior Orderly in 1917, all the men were engaged or dismissed by the hospital Matron who, with the ward supervisor, detailed duties and responsibilities. It was during Mr. Pophie's tenure that a summary of duties was drawn up and a new staff was suitably trained.

As the orderlies (there are 32 on staff at the present time) are now part of the nursing staff, the maintenance of a high standard of efficiency has again become a responsibility of the Director of Nurses. A training program has been organized in the School of Nursing with those working in psychiatry, urology, oxygen therapy and the operating suite receiving special training.

## CALGARY HOSPITALS' BOARD

Until the early 1920's four hospitals were operated and controlled by the General, namely the Isolation Hospital, Tuberculosis Hospital, Smallpox Wing, and the Calgary General Hospital, itself. The Board, therefore, was reorganized and named the Calgary Hospitals Board. It was composed of 14 members: three elected from subscribers, four elected or appointed by the medical profession, and six elected or appointed by Council and ratepayers. The Mayor as chairman, had an ordinary vote and a casting vote in case of a deadlock.

The 1920's were prosperous years in Calgary. Alberta produced its largest wheat crop. The Stampede was revived. Business was booming. The Provincial Government assumed control of the Central Alberta Sanatorium. The services of the Calgary General to tuberculosis patients were then discontinued. And in 1925, gas from Turner Valley was used for fuel in the General's boiler plant and the staff was reduced to one engineer on each shift.

## BOILER PLANT

To bring the Central Panel Boiler Room history up to date, a new boiler plant was built in 1941 and, due to the addition of more mechanical equipment, a maintenance man was employed along with the plumber to take care of the extra work. Further expansion, with the construction of the Percy Wing in 1941 and the present General Hospital in 1952, required further additions to the Maintenance Staff.

The present boiler plant, with its new extension in 1955, is considered to be one of the finest plants of its kind in Canada.

Alex Middleton, who joined the hospital staff as chief engineer in 1923, held this post on until his retirement in 1955. At the present time this department is staffed by a plant superintendent, five engineers, one electrician, one plumber, five mechanical maintenance men, four carpenters, three painters and a groundsman.

## THE 1930's AND MEDICAL RECORDS DEPARTMENT

City Council re-instated the Hospital Board in 1934 to relieve the Mayor and other City Hall members of the increasing burden of administration. Nine members — the Mayor, two aldermen, and six council appointed constituents — were installed.

Events occurring within the hospital during these depression days included the foundation of the present Medical Records Department.

On March 15, 1937, an office was set up across the corridor from the Board Room, which served as the doctors' lounge, and a stenographer was installed. It was Miss E. Forbes' duty to write histories and complete records from dictation of staff doctors. At first this was a part-time job, but it soon became full time, and, in addition, required the part-time assistance of one other stenographer. The work of assembling charts and indexing them still remained with the switchboard operators.

There is very little information available regarding medical records previous to this time.

The year 1914 appears to have been the first year in which charts were assembled for storage. These are cards on file dating back to 1911. Some of these would appear to be the complete record of the patient's stay in hospital, containing the dates of admission and discharge, the patient's number, his name and other pertinent data, as well as the hospital account. In 1918-1919, the cards included only the name, address, chart number and sometimes the name of the doctor.

In the early 1920's, the indexing of patients' cards and the assembling of charts was much improved and operations were indexed. It is not known just whose duty it was to assemble and index charts prior to 1923, but around that time the work was divided between the switchboard operators and the admitting and discharge clerks. Standards for acceptable records and record keeping were being set and the responsibility for obtaining histories and the proper completion of charts became a major part of the work of the switchboard operators.

As stated, it was in the middle thirties that the nucleus of the present Medical Records Department was born. Higher standards set by the Standardization Committee of the American College of Surgeons increased the work of writing histories acceptable to the Board, and with an increase in the number of patients, were precipitating factors.

By this time more and more work connected with charts was being assumed by the Medical Records Department. In June 1942, another full-time stenographer was added to the staff and the charts then became the sole responsibility of this Department. Since that time the staff has increased to ten in number, three medical librarians, four senior medical stenographers, two junior medical stenographer clerks, and one clerk-typist.

The whole department has been re-organized during these years. Charts are readily available for the benefit of patients in future illnesses, for insurance purposes, for medical research and other purposes. Patients index, disease and operation indexes, monthly analysis of hospital services and many other statistical reports are available for the several purposes for which the department was established and is responsible.

### DIETARY DEPARTMENT

With the increased interest in special diets in the early 1930's a diet kitchen was wedged in to the Fifth Floor. Soon after the dumb waiters on the east side and west end of the kitchen were torn out and sinks installed. The food for the patients was then transported by elevator in electrically heated food carts.

Mrs. K. Campbell is well remembered for the part in preparing special diets, assisted by the student nurses.



Calgary Herald late 1920's

The Dietary Department of the Calgary General Hospital has changed in many ways throughout the years. At one time there were twenty people on staff in the kitchen to take care of food preparation and service. With the increased area and facilities of the General IV, the number has jumped to one-hundred-and-six.

In the early days two cooks were able to prepare the food for everyone. Their work was lightened when steam was introduced and a steamer and stock pot was installed to cook vegetables and soup. Among the cooks' names to be remembered are Forbes, Williams, Moore, Cole and Cummings.

During the depressed years George Cogswell, part of the Dietary Department for many years, receded to a less agreeable preparation, rationing and times of shortage. Mr. Cogswell is still with the hospital, now associated with the House-keeping Department.

Fred Taylor also played a part during these early years. Besides driving the truck and taking care of the supplies, he still found time to butcher the meat. Other names recorded during this period are Coover, Smith, Davies, Giles, Sheriff, Evans, Maudry, and Clifton. Miss Allen was one of the first dietitians at the General Hospital coming on staff in 1914. She was followed by Wardley, Andrews, Leppert, Gillespie, Blow, Sacks, Akers, Hume and Shuck, to name only a few.

The staff food service has gone through progressive changes throughout the years. Miss Margaret Keams, who retired in 1950 after 28 years on staff remembers the days when there were dining rooms in the Nurses' Home, Old Board Room and the Main Floor of the General Hospital.



Cafeteria Today

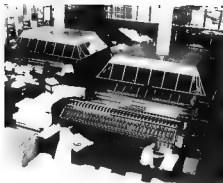
When the number of student nurses increased above 75 a cafeteria was built adjacent to the old Purchasing Department, and dining rooms opened on the fifth floor off the kitchen.

Names associated with the staff food service are Keams, Sullivan, Morrison, Greitz, Rauch, Noble, Loran, Engel, Busch and Snyder. One of the old "new comers" is Vic or DePinto who came in 1943 and is still on staff as Chef.

## LAUNDRY

In the laundry in the 1930's the second attempt to modernize production ended in failure when a newly installed electric machine went up in smoke, setting the laundry on fire also.

Bringing the record up to date in the department, however, laundry personnel gratefully moved into its present modern quarters in July, 1954. It is considered one of the most up-to-date laundries on the North American continent. Production charts show that in 1939 it took twelve months to complete 306 tons of laundry. In 1955 only 8 months were required to complete 750 tons of laundry.



Laundry

## ALUMNAE ASSOCIATION OF THE SCHOOL OF NURSING

Another innovation during the 1930's was the foundation of the Alumnae Association of the Calgary General Hospital Training School of Nurses. I came into being at an organization meeting held in the lecture room of "A" Block, in January, 1936, following a preliminary meeting called in December, 1935, by Miss S. MacDonald, Superintendent of Nurses. The purpose of the proposed organization was outlined to the ninety odd nurses present. It was learned that School graduates numbered 614, and following a full discussion, it was decided to organize at once.

Mrs. R. G. Straker held the office of President for the first three years, and a great deal of success and outstanding achievements of the Alumnae were due to her ability, enthusiasm, and tireless effort. Mrs. Straker's interest in the Alumnae Association continues and she is a source of encouragement and help to those who have carried on the objects of the Association.

Calgary's population had now increased to 83,000. And, as usual when the population grew, there was a greater demand for hospitalization. In 1937 the medical staff of the General Hospital advocated the construction of a new and more modern General Hospital.

## 1940's AND THE PERLEY WING

The first major step to improve conditions, however, was not made until 1941, the construction of the Perley Maternity Wing. The addition of this Wing was made possible through an estate left by Mr. Perley, a Calgary pioneer who had taken an early and active part in the formation of the first hospital.

In 1946, the Board secured the services of Dr. J. D. Henslip as full-time medical superintendent. Dr. W. H. Hill had combined the duties of hospital super-

intendent with those of City Health Officer from 1933 to 1946. Dr Henslip, formerly medical director of the Ontario reformatory at Guelph, was medical superintendent until Dr L. O. Bradley, the present Administrator, joined the staff of the Calgary General Hospital.

## HOSPITAL EMPLOYEES' SAVINGS AND CREDIT UNION—1945

Early in 1945 meetings were held with the officials of the Credit Union League of Alberta and other credit unions. All phases of the movement were explained, as well as the advantages in having a hospital organization instead of joining that already in operation at the City Hall.

On May 1, 1945, a Credit Union Charter No. 179 was received from the Provincial Government. The Charter listed as members Miss M. Kearns and Messrs P. Farrow, A. Macoulson, F. Pickard, A. E. Branton, W. Pearson, G. Minihurnett, H. Sadler, W. Mansfield and W. Paterson. Any member of the hospital staff, including nurses were eligible to join.

In December 1945, there were thirty-seven members, with \$588.93 invested as savings, and \$387.00 out on loan.

Membership has gradually increased since then. In December 1954, there were one hundred and seventy members. The Savings Account amounted to \$35,785.15. The Credit Union had loaned a gross sum of \$126,841.00, with only \$66 written off as a bad debt.

During March, 1947, the Credit Union took on Loan Protection Insurance and in May, 1947, Share Insurance, thus protecting loans from loss by death or total disability, giving members life insurance based directly upon life savings.

## CERTIFIED PROVINCIAL NURSING AIDES—1946

The first School for Nursing Aides in Canada was opened in Calgary in 1946. Ex-service women, who had some hospital training during the war, were enrolled to encourage them to remain in the nursing field and to obtain some recognition for their services.

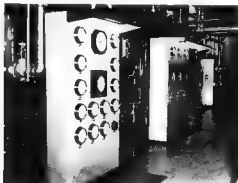
Classes were limited to ex-service women and were sponsored by the Rehabilitation Programme of Canadian Vocational Training. Due to the limited number of girls available and to the demand for such training by non-service personnel, however, the classes were enlarged to include those interested and able to meet certain standards. Because of satisfactory results, the Provincial Nursing Aides' Act was passed in 1947. It placed training and certification on a permanent basis.

The Nursing Aides are now prepared to give the additional assistance so urgently required by many hospitals, thus relieving the graduate nurse for more specialized care and supervision. The students spend 39 weeks in study and practical training in various provincial hospitals. Nursing ethics, Physiology and anatomy, dietetics, and patient care are included in the curriculum.

## PLANS FOR GENERAL IV

In 1946-47, it became increasingly apparent that, as on the other two occasions, hospital services must expand. Calgary rs papers were of two minds about the need for a completely new hospital. However, And when it was realistically decided that the old practice of adding a wing here and a department there would be impractical for a long view of hospital services, much additional controversy arose as to the location of a new General. There were those who insisted that the Leagheed site (now site of Red Cross House) was the proper location for such a building. Other persons thinking of the economies of the situation, argued that a new hospital, built on the site of the existing General III, could make use of the Penney Wing, Macdonald Hall, "B" block and the lecture hall.

The Power Plant, built in 1941 and considered to be one of the finest in the West, was one of the deciding factors in the outcome of the controversy. By law, it was passed the authorized construction of a new four million dollar building to be erected on City land, adjacent to and west of the old site.



Power Plant Panel

Sod was broken for the building of the Calgary General Hospital IV on March 21, 1948.

## CALGARY GENERAL HOSPITAL IV

The official opening of the new seven-story Calgary General IV took place on March 1, 1953, when His Honour J. J. Bowden, Lieutenant Governor of Alberta, officiated at ceremonies in the seventh floor auditorium. A highlight of the ceremony was the presentation of a golden key to the building, a replica of one made for the opening of the old General in 1910, to Miss Bertha Von Graeven, whose thirty-five years of service since she graduated in 1919, was a record among General alumnae on the hospital staff.



The new unit, including the Perley Wing, had a complement of 626 beds and 110 basins. This major increase in beds soon had its effect on other supporting services and programs. More admissions and patient days demanded at once a doubling in laundry capacity. The new laundry was opened on July 4, 1954.

### CENTRAL SUPPLY

Preceding the new laundry was the reality of a Central Supply Room when it began to function in March 16, 1953. Many weeks before a great deal of planning and organization had been the main object of several people and one in particular. Mrs. Christine White travelled to Eastern Canada and the United States to observe the manner in which Central Services were operated.



Central Supply Room

Although a comparatively new service, the Central Service Department is now internationally recognized as an essential hospital facility for maximum operation efficiency and economy. It originated because of the numerous advantages of centralized processing, storage and issuing of increasingly complex medical and surgical supplies and equipment. New hospitals include a central supply service as a "must" in their programs and renovated buildings make provision for such a department.

Central Service operates on a twenty-four hour basis. It is staffed with three graduate nurses and sixteen lay workers. Student nurses rotate through the department as part of their curriculum.

### FURTHER IMPROVEMENTS

In 1954, the high birth rate in Calgary and district created an urgent need for a larger maternity service. Consequently, the Perley Pavilion was renovated and rebuilt to double its bed service capacity. It entered service in January 1955.

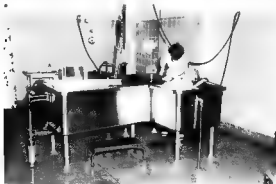
A cold spell in February 1954, indicated the need of a larger power plant. Planning and construction began promptly and the big 25,000 pound order went on the line in February 1955.

#### Prior to this installation, another vital service began at the General IV. THE PHYSIOTHERAPY DEPARTMENT AND THE HUBBARD TANK.

This department has a brief but progressive history. In January 1953, Miss Isobel Sprack, who had been doing some work at the General for the Workmen's Compensation Board, was employed to establish a Physiotherapy Department. Until July 1953, there was but one therapist and a few pieces of equipment. All treatments were given on the wards.

At the opening of the West Wing of the hospital three rooms were allotted to the physiotherapy branch. These rooms are now the hydrotherapy, electrotherapy and gymnasium areas. From this beginning the department grew very rapidly as a result of excellent co-operation from other departments, and from various contributing factors.

Concurrent with the opening of this section a severe poliomyelitis epidemic occurred in Alberta, and as a result of it much impetus was placed on growth and recognition of the department. The Canadian Legion Polio Fund contributed several additional pieces of valuable equipment. Thus the treatment rooms were gradually supplied with the most modern furnishings.



Hubbard Tank

Since October 1953, the facilities have been shared, and valuably contributed to, by the Canadian Arthritis and Rheumatism Society which has two therapists on staff. They operate their mobile and out patient clinic from the General Hospital. There is a mutual agreement to share the treatment apparatus, some of which has been donated by the Arthritis Society.

In the first year of the Physiotherapy Department it was concerned mainly with rehabilitating the large numbers of polio patients. Since then the department's activities have broadened widely. With a general cross-section of "in" and "out patients" (covering fractures, injuries, neurosurgery, medicine, eye, ear, nose and throat, dermatology and general surgery), the department is helping to restore as many as possible to the highest level of normal function. The permanently disabled are taught to live as fully and as independently as possible. The ultimate aim of physiotherapy is to restore the patient to his usual employment, home-life and leisure activity—complete with range of movement, muscle power, co-ordination, balance, confidence and ambition.

The Physiotherapy Department contributes to the nurses' In Service education, programme by giving lectures on patient care, and methods of rehabilitation. This link with the School of Nursing has, and is, an outstanding contribution by the department.

Staffed by therapists from all over the world, each has contributed varied technical and administrative knowledge to the department. Practical summer training is now being given to students of the recently established School of Physiotherapy of the University of Alberta, and to students from McGill and Toronto Universities.

To summarize the Department of Physiotherapy's growth—the number of treatments given in 1953 were 6,240, earning \$6,515, in 1954 there was an increase with 14,732 treatments given and \$22,864 earned.

## PSYCHOPATHIC DEPARTMENT

The Hospital Board report of 1917 noted the need for proper facilities for treating patients with mental disorders. Little was done about putting such treatments into effect, however, until the General Hospital IV was opened in 1953. Provisions were made at this time to set aside one section of the basement floor in the west wing for the treatment of such cases. The Psychopathic Department, under the guidance of Miss H. Shed, was put into service in June 1954.

Since that time many patients who would formerly have been sent to Ponoka have been treated successfully at the General IV. Here, under a specially trained staff, patients with mental conditions receive the same careful treatment as do those in other sections of the hospital. Every effort has been made to have them live as normal a life as possible. For example, whenever possible, patients are encouraged to eat together, go for car rides and walks, and take part in sing-songs.

Miss E. Clement is now the head nurse in charge of the Psychopathic Department. Miss B. Jaske is in charge of occupational therapy.

## 1950's AND THE MASTER PLAN

With the large increase in clinical materials it became possible to plan a significant expansion in the School of Nursing. By a very substantial majority, a \$1,800,000 by-law was passed by the electorate in October 1954, to build a large modern school and residence. Construction began in October 1954, and should reach completion early in 1956.

The only remaining outstanding item in the Calgary General Hospital's Master plan is the unit for the care of the chronically ill. Planning is under way for a building to be located on the site of the old General Hospital III. It will include a full range of services to this group needing lengthy care, particularly in the field of rehabilitation.

As it has now been recorded, the past sixty five years of the Calgary General Hospital's history has been one of continual growth and expansion. With Calgary's population now at 150,000 it is safe to predict that the hospital will, at some future date, again be faced with the problem of how best to meet public demand for service. How this problem will be solved remains to be seen. Residents of Calgary and district, however, may rest assured that the General, as in the past, will always play a leading and special part in Alberta's future.

"Sixty-five Golden Years of Service to Calgary"

## STAFF DOCTOR



Dr. H. A. Gibson  
M.D., C.M., F.R.C.S. (Edinburgh)  
F.R.C.S. (Canada)

Dr. Gibson graduated from Queen's University in 1903. He joined the staff of the Calgary General Hospital in 1904. For many years he was Chief of Obstetrics and later held the position of Consultant in Obstetrics.

## STAFF DOCTOR



Dr. L. S. Mackid  
M.D.C.M., F.R.C.S., A.I.M.

Dr Mackid graduated from McGill University in 1904. On the re-organization of the Calgary General Hospital, Dr Mackid was appointed Chief of Staff and Chief Surgeon, a position which he held for several years.



Miss G. Hall  
Director of Nursing



Miss Street  
Associate Director of Nursing



Miss Allen  
Associate Director of Nursing Education

## A SURVEY OF NURSING AT THE CALGARY GENERAL HOSPITAL 1890 to 1955

A survey of sixty years of nursing service in any hospital is bound to show violent change. It hardly seems possible, however, that a more complete metamorphosis could be found than in the case of the Calgary General Hospital.

The building of the railroad and the subsequent development of the surrounding territory made the need for hospital facilities in the little foothills town of Calgary imperative.

From the construction gangs, busy extending steel into the foothills, came a steady trickle of typhoid cases. These, as well as other emergencies needing medical attention, had to be cared for in most inadequate quarters. Because so many of the work crew members were bachelors, patients often would have died unless taken in by pioneer women or treated in the police hospital, then the only institution of its kind.

The cottage hospital, Calgary's first "General", was opened in 1890. It was a true symbol of the early west, even to the bullet holes in the doors, souvenirs of the town's rougher days.

Pioneer Canadians were not content with their makeshift hospital, however, and even before the opening of the cottage, a grant of land had been obtained "north of Angus Fraser's farm across the Bow River". No development took place for several years, probably because at that time it was too far from town. Work began on the planning of a larger hospital in a more accessible area, and construction began in 1894 on the first "permanent" general hospital at Twelfth Avenue and Sixth Street East, later the Isolation hospital, and presently the Mount Rundle Lodge for senior citizens.

With a "real hospital" in the offing, the hospital board decided the time had come for a graduate nurse to head the nursing staff. Miss Mary Bertles, a graduate of the Winnipeg General Hospital, was appointed to the position of matron with a staff of an orderly and an assistant.

When Miss Bertles arrived in Calgary to "take charge of the new hospital", she found that the cornerstone was being laid that day for the building she had hoped to find completed. She moved into the cottage hospital, and when her staff decided to leave two days later, she found herself cook, nurse, orderly and housekeeper. For two months she continued as night and day nurse with an average of eight patients in the hospital the whole time.

With the addition of a second trained nurse, Miss Tyers, as assistant, it was decided to enroll student nurses and so relieve the shortage of trained women. Marion Moodie, the lone probationer, began her training in the tiny hospital, sleeping in the cook's bed by day and relieving the two nurses by night. During her hectic "first night", Miss Moodie had to watch a man with severe bronchitis downstairs, another upstairs with delirium tremens, and another in a room opposite dying of cancer. She had strict orders to see that the first did not choke, the second did not jump over the banister, and the third got relief from pain.





Miss Marion Moodie

### FIRST NEW HOSPITAL

In May of 1895 the new hospital, with room for twenty-five to thirty patients, was completed, and the matron, her assistant and the training school's one student moved in, together with thirteen patients. To those used to the present day conveniences of the modern hospital, it is surprising to think of those three busy nurses going into ecstasies over such basic equipment as running water, hospital beds rather than back breaking low cots, and private bedrooms for the matron and her assistant.

One ward of the new hospital was earmarked for nurses' quarters, and gradually the number of students rose to six. The first student received an allowance of five dollars a month for the first six months after probation, six dollars a month for the second year, and seven fifty during the third year. Soon after, students' allowances during the third year were raised to ten dollars a month. These early students wore the first Calgary General regulation uniform consisting of a blue and white, long sleeved dress, stiffly starched high collar and cuffs, cap and apron, black stockings and high topped black boots. The large ribbon-decked medal given Miss Moodie at her graduation was soon replaced by a plain silver pin, bearing a red cross.

### FIRST STUDENT NURSE

Students during those early days received their instruction in a hut or mess fashion, with theory and explanation coming when busy doctors or nurses could spare a few minutes. Serious responsibility was the lot of even the new probationer Miss Moody, who in 1898 became the Calgary General's first graduate, had a bout of typhoid in the middle of her training, after long hours on solitary night duty during a typhoid epidemic.

Calgary doctors were so enthusiastic about having nurses trained in the city, they could hardly wait for them to graduate before calling them to do special nursing in patient's homes. In slack times, students were spared from the hospital to help the doctors.

After graduation, nurses were soon absorbed into special duty nursing, where they usually received a salary ranging from twelve and a half dollars a week for maternity patients to fifteen dollars for surgical patients. Although they were anxiously sought after by medical men, who recognized the value of graduate nurses, their reception by the women who had until now filled nursing needs in the community, was not so happy. Many of the untrained women resented the arrival of graduate nurses, and openly criticized their "newfangled ideas", such as baths in bed, as "foolish" and even "dangerous."

In 1898 Miss Birtles, who had accomplished the difficult task of organizing the hospital's first nursing service and training school, resigned to take over the position of matron at the General Hospital in Brandon, Manitoba. Miss Tyers, formerly her head assistant, was appointed matron, and shortly after work was begun on the construction of a new building which was to house maternity cases and also provide a nurses' residence.

In 1905, Miss Margaret Dangerfield, a graduate of a training school in London, England, was appointed matron. She resigned her position early in the century, to be replaced by Miss Jessie Scott, a graduate of the Toronto General Hospital school of nursing.

The popularity of the hospital and its nursing staff was seen in the enthusiasm of some two hundred cowboys, who donated money to furnish a hospital room after several of them had been cared for at the General.



Nurses' Sitting Room 1920's

Like many cities in Western Canada at the turn of the century, Calgary grew much faster than anyone had anticipated, and the Hospitals Board was soon faced again with the problem of lack of adequate hospital facilities. Plans were drawn up for a complete new hospital north of the Bow River, the site of the present Calgary General.

It was decided to reserve the Isolation Hospital buildings for isolation patients, and the Calgary Isolation hospital was operated for many years under the supervision of the General. A graduate nurse was made superintendent, and nurses from the General training school continued to serve several months of their training in the old stone building. The three best remembered superintendents, all of whom served many years in other capacities before taking complete charge, were Miss Ann Woods, Miss Ann Campbell and Mrs. Edith Henry.

### FIRST SUPERINTENDENT OF NURSING

In accordance with the seemingly established tradition, a new matron came to the new General hospital building. She was Miss Emma Jane Smith, from Montreal, and the first nurse to be given the grander title of "Superintendent of Nurses". Other staff in the new building included some twenty-five student nurses as well as supervisors.

### FIRST GRADUATION

It was in Miss Scott's time that graduation was made a special ceremony. Previously a nurse was simply handed a diploma when she left the hospital at the end of her training. In 1910 the first Graduation Exercises were held in the hospital, beginning a traditional ceremony which has continued until the present, although in time it outgrew the hospital and had to be held in various places in the city.

Immediately after the opening of the new hospital, student and staff nurses were housed in the hospital, but before long the same old story of lack of space for patients began to be repeated. Just a year after the building was opened, the Bow River became contaminated, and scores of railway workmen, living in construction camps at the city outskirts, contracted typhoid as a result of drinking the river water. Overnight, Calgarians saw their "big" hospital overcrowded. The supervisory staff and the student nurses had a case load of two hundred patients. Students had ten patients each to look after every day, and the hospital appeared to be bursting at the seams. During the summer of 1912, tents were erected on the hospital lawn to house typhoid convalescent patients, and in 1913 a nurses' residence, later known as "C" Block, was built so that more ward space could be opened in the hospital.

### FIRST GRADUATE DIETITIAN

In 1913 instruction in the diet kitchen was incorporated into nurses' training when Miss Jean Allan, the first graduate dietitian was appointed. Previously student nurses had had some instruction from the cook, but with Miss Allan's advent they were introduced to up-to-date information on therapeutic diets.

The most difficult aspect of meal preparation those years was the manipulation of the coal stoves in each ward where the food had to be kept hot after

it was brought down the lift from the kitchen. In theory it was a porter's job to keep the coal scuttles in the wards filled, but many an overworked student had to add the job of fetching coal to her already full day.

## FIRST WORLD WAR

With the start of the First Great War in 1914, eleven graduate nurses from the Calgary General Hospital school of nursing enlisted and served overseas, with an additional twelve CGH graduates serving in military hospitals in Canada.

The war brought a serious shortage of nurses to the General. Regular hours of duty for students and graduates were long enough "seven to seven" with one hour off each day, and a half day or night off each week, but often there were not enough nurses to provide relief even during these brief periods.



Blue Room

Perhaps the most hectic time as night supervisor was served by Miss Anna Hebert early in the war, when for six months there was no one available to relieve her for even one night. Miss Hebert, then a graduate for two years, had one senior and one junior student nurse on each floor to help her keep track of two hundred patients in the hospital.

In an effort to keep the hospital running many graduates who were engaged in special duty practice, turned out at the hospital on their free days to roll bandages and make dressings. For these services the nurses received no pay it was simply their "war effort".

## THE GREAT "FLU" EPIDEMIC

Toward the end of the war, activities at the hospital began to "quiet down" and redecorating and painting were completed. The peaceful interlude was short lived, however, and in 1918 and 1919 the famous epidemic of "Spanish Influenza", which swept the world turned nursing services upside down in Calgary as it did everywhere.

Influenza patients were not admitted to the General Hospital and the operating room was closed for everything but accidents and emergencies in an effort to keep the disease out of the hospital. Despite these precautions, the General had its share of the "flu" as the infection made its mysterious way to patients already in the hospital. With special influenza hospitals set up in Calgary schools and in the Victoria Pavilion, the crying need in the city was for nurses. Although the hospital was full to capacity of regular patients, any nurse who could be spared went to help direct the nursing being done in these centres by teachers, housewives, secretaries — "anyone who could walk"

## REGISTERED NURSES' ACT

By 1919 the "flu" epidemic had tapered off and Calgary nurses with a "breather" at last to take stock of themselves, realized that the war years had brought some important changes to the status of graduate nurses in Alberta. Although local associations of graduate nurses had previously been formed in various Alberta centres, it was not until 1916 that a "Registered Nurses' Act" was passed, giving official recognition to an Alberta association of graduate nurses. In 1919 an amendment was passed to the Act, placing the Association among other professional associations, under the control of the University of Alberta. The Association was given the same standing in University councils as other professions held by representation on the Senate of the University.

## NEW VISTAS IN PUBLIC HEALTH

In addition to new professional status, a new field for graduate nurses was opening up in the post war years in public health nursing. Although the Victorian Order of Nurses began work in the city in 1910, the war years seemed to give the real impetus to public health in Calgary. In 1916 a feeding station for babies was opened by the city. Although it was merely a formula mixing service, it was the start of the city's present day public health program, which has attracted many General graduates throughout the years.

Public health was also gradually worked into the student nurses' program, with students serving with both the Victorian Order of Nurses and the City Health Department.

New status brought new responsibilities. Although in 1919, the year following the legislation concerning graduate nurses, all hospital graduates were granted their "R.N.'s" on completion of training, it was decided to have every graduate nurse write special examinations set by the University in order to earn the coveted initials after her name. Students at the General, like those in other Alberta hospitals, took examinations, which were set in three sections: written, oral and practical.



General Ward 1906

## FIRST SCHOLASTIC AWARD

Recognition of superior achievement by student nurses was given first by the City of Calgary when a gold and silver medal was presented for proficiency in nursing studies. The city was also the first scholarship donor with a grant for post graduate study to a General Hospital graduate forming the first of many such awards.

Although they gained the standing of 'professional women', those post war nurses, both graduate and under graduate, still faced long hours of duty and responsibilities not much lighter than those which confronted the first graduate, who thirty years before had started her first probationary duty as lone night nurse in the tiny cottage hospital.

Students of those days remember that recreational activities were not much of a problem — there was hardly any time for recreation. An old piano, crowded out of the "sitting room" in the nurses' residence by the need for more beds, provided music for dancing — which also had to be done in the corridor. At one period when space for students was badly crowded, the day and night nurses used the same beds, with each shift having to change bed linen before going to bed.

Graduates who went into special duty nursing during the post-war years earned three dollars a day and a "day" was taken to mean all day — twenty four hours of it — with the nurse catching what sleep she could in a chair by the patient's bed.



Semi Private Ward  
Today

Thirteen graduate nurses, together with the students, guided the hospital through the post war years. Of these, nine were on supervisory staff — head nurses who took charge of the wards and directed the work of the student nurses. Supervisors and students worked from seven to seven, with a day or night off a week, and one hour off during the afternoon (if circumstances permitted it). During her hour off one head nurse would be relieved by another from a neighboring ward who would undertake to supervise the more critical patients as well as look out for her own patients during this time.

### FIRST INSTRUCTRESS

Another graduate nurse was in charge of the nurses' residence, another was instructress of nurses, and the two remaining of the thirteen were the superintendent and her assistant.

One of the most perilous duties was that of night supervisor, which in the post-war years was considered to be important enough to have an assistant. Previously one graduate, with several student nurses to help her, would be in charge of the entire hospital from seven in the evening until seven in the morning. A brave heart and hardy arches must have been essential for this task when the supervisor often had to run from one end of the hospital to another as "bad nights" produced nothing but emergencies and upsets to try her. Telephone operators helped during those years by developing a system of ringing every telephone in the hospital with two rings when the night supervisor was wanted. Those who braved the "night shift" in those days remember that the work did not bother them nearly so much as did the night porter who was constantly having his elevator stolen by busy nurses who couldn't wait for the arrival of their chauffeur to drive them to emergencies that had occurred on other floors.

In 1921 the bed capacity of the General was enlarged by the opening of the east ends of the second and third floors to patients. Until now, these areas had been used for nurses' residence, but were vacated by moving nurses into "A" Block.

During the early twenties both students and graduates at the General began to long to pick up the slack to the present day's shorter hours and better pay. "Hours off" were increased from one to two hours and another half day was added to each week. Graduates doing private duty were put on two shifts with a pay increase of a dollar a day in 1923, meaning that a nurse received four dollars for a twelve hour shift instead of three dollars for twenty-four hours.

In 1923 two important changes were made in the nursing staff, as both Miss Rutherford as instructor and Miss Edy as superintendent of nurses resigned. Miss Sarah Macdonald, a graduate of the Massachusetts General Hospital in Boston was appointed superintendent of nurses. She has been on the staff since coming west in 1911 first as a ward supervisor and later as assistant superintendent of nurses.



Miss Sarah Macdonald

Miss Jessie Alexandria Connal, a graduate of the Royal Infirmary in Glasgow, Scotland, was appointed instructor in 1923. She had joined the staff of the General Hospital in 1921 after first seeing service overseas with the Territorial Nursing Service during the First Great War.

Under the able guidance of these two women, the twenties at the General appear uneventful to the historian although in reality they were busy times, nonetheless important for their lack of economic crises, severe epidemics or critical lack of space. The busy hours in Calgary were fairly prosperous and managed to pay their bills. Few "crisis problems" made headlines. Graduates and students continued to work long hours and the rumor that "the General is obsolete" was only whispered by doctors and nurses. The people of Calgary were



satisfied that they had a modern up-to-date hospital which needed no improvements.

These were the days when mustard plasters, poultices and hot fomentations were responsible for many hours of the nurses' time. Patients were admitted to hospital and stayed there for weeks and sometimes months. It was a nurse's job to know her patient's idiosyncrasies and there was time to learn that Mrs. Jones never drank coffee or that Mr. Smith liked three pillows.

With students, the emphasis was still on service rather than education. The nursing profession, constantly suffering from marital casualties, was always short of personnel. It was still the accepted philosophy that the primary reason for a training school was to provide student nurses to perform the bulk of nursing tasks, as well as to provide the community with graduate nurses. These students more than earned the small allowance and board and room supplied by the hospital. Like student nurses everywhere, they not only bore a large part of the nursing load, but they performed a host of tasks that could never be termed educational and which could as well have been done by a hired menial.

## THE GREAT DEPRESSION

The depression was much felt at the General Hospital as it was in every corner of Calgary. Relief recipients flocked to the hospital pharmacy where they were issued free drugs. General graduates, unable to get positions as special nurses, were glad to be taken on the hospital staff at a monthly salary of thirty dollars in addition to room and board. Many supervisory nurses, already on staff, had to take substantial salary reductions as the city slashed and reslashed its hospital budget in a desperate attempt to make ends meet with the reduced taxes it was able to collect.

The people of Calgary, anxious that "Calgary girls have first chance" campaigned to have local students accepted in the nursing school, which was flooded with applicants as worried parents grasped at the chance for free room and board along with nurse's training for their daughters. Probably as a result of the increased competition for entry into training schools, educational requirements for student nurses were raised to include grade eleven standing.

A bright spot in the dreary depression years, in the eyes of student nurses, was the revision of uniforms instituted by Miss Macdonald. The first part of the old uniform to go were the high top boots, which were replaced by black oxfords in 1934. In 1936 short sleeved uniforms with small white cuffs were comfortable after the former long sleeves with the stiff white cuffs which could be removed only when necessary to "scrub" for treatments.

## FIRST PONOKA AFFILIATES

It was also during the depression that the General training school received its first students from the Alberta Mental Hospital at Ponoka. These students took two years' training at an affiliated hospital, of which the Calgary General was one.

## CALGARY GENERAL HOSPITAL ALUMNAE ASSOCIATION BORN

Another highlight of the thirties was the organization of the Calgary General Hospital Alumnae Association in 1936, with Mrs. R. G. Straker as president.

The first social function held by the alumnae was a banquet given for the graduating class in the spring of 1936. Later on, the impressive candle lighting ceremony became another tradition of the banquet when members of the graduating class hand their lighted candles on to members of the succeeding class.



Miss J. Cannon

In the fall of 1936, by sponsoring the opening night of Calgary's artistic ice arena, the alumnae association raised its first funds—seven hundred dollars. Sponsorship of a "noquis night" in the form of a gala ice carnival became a tradition of the General Hospital Alumnae, and for nine years highly successful carnivals were held. With the money raised, the association was able to furnish many hospital rooms, give scholarships for post graduate work and support worthy causes in the community.

Several years later the alumnae were to honor with life memberships, their first president and three other graduates whose enthusiasm played a large part in keeping the alumnae association an energetic and interesting group. These women included Mrs. Straker, Miss Mary Watt, Miss Bertha Von Gruenigen and Miss H. Whaley.

During the late thirties, as the depression slowly lifted, the Calgary Hospitals Board began to try to bring the General up to date in its facilities. Although a by-law requesting money to build additional space had been defeated earlier, by 1938 money was available for limited expenditure, and modern sternalers in every dressing room were one addition which provided a relief for busy nurses.

## WORLD WAR II

By 1939, it was common knowledge to the Calgary public that the General was not only too small, but that the building was obsolete. However, with the start of the Second Great War, little could be done in the way of building and the only addition was a twenty thousand dollar wing for "B" block built in 1939 for student nurses' living quarters.

In 1942 another addition was built, a combination lecture hall and eight-bed practice ward. This building, so very unique to the hospital as Miss Connors' pride and joy, embodied the most up-to-date equipment available for nurses' education.

In 1941 Miss Macdonald retired from her position as Superintendent of nurses, and was succeeded by Miss Anna Hebert, the first graduate of the General Hospital school of nursing to be appointed to the superintendent's position. A graduate of 1913, Miss Hebert had returned to the hospital, two years after graduation as night supervisor, which position she held for five years until she was appointed assistant superintendent of nurses.



Class Rooms of 1920's

## FIRST STUDENT COUNCIL

The following year student nurses were assisted in setting up their own student government association, the first in the school's history.

Space in the hospital continued to be desperately short, and it became evident that despite war-time shortages, something had to be done to provide more room. In 1943 a new nurses' residence was built, later to be known as "D" block. Formally named the Sara Macdonald Hall, in memory of the recently retired superintendent of nurses who died in the same year, the new building provided private rooms for student nurses for the first time. The alumnae Association undertook to furnish the sitting room of the new building, providing a

pleasant recreational room which later had to be pressed into service for a bedroom as the ever overcrowded hospital continued to grow.

The early war years saw another change for student nurses in new educational requirement. In 1941, throughout the province, students were required to have a high school diploma, with Chemistry two, Physics two or Biology, in order to enter nursing schools.

As the hospital became busier with Calgary's booming war-time population, changes were made in nursing hours and responsibilities. A general duty graduate and five students in maternity. Student's hours improved, with day students working an eight hour tour of duty during the day, and every student on night duty being given a whole night off each week.

With hospital space still at a premium the Alumnae association as well as the Calgary Medical Society, began to campaign for a new hospital. The Calgary Herald, anxious to see if the fuss were justified, went on a tour of the hospital, with the result that the problems of the hospital were brought forcefully before the public.

"The twenty-four beds usually kept as an emergency have been distributed throughout the hospital corridors and lobbies," the Herald reported, "life being a perpetual emergency for it at the moment one bed has hardly time to cool when one patient is released before another is put in."

No one felt the strain of overcrowding more keenly than did the nursing staff. The pressure of trying to clean up wards and operating rooms in five or ten minutes to make room for the next patient, was as hard on the nursing staff as was the large number of patients every available nurse had to look after daily.

With other Calgary hospitals in the same dire straits, it became evident that new hospital accommodation could not wait until the end of the war. Construction began in 1943 on the Perley wing, which opened in 1944 to take care of maternity patients. A further effort to alleviate overcrowding was made in 1945 when thirty chronic patients were moved to the west block of the Isolation hospital. In this move is seen another major change in nursing over the years. With the advance of modern medical science patients with serious communicable diseases are not nearly so numerous as they were when the first Calgary General Hospital was built.

## COMMUNITY NURSING BUREAU FORMED

The war years continued to be a drain on Calgary's nursing supply. With the aid of the alumnae, a nurses' registry, called the Community Nursing Bureau, was set up to handle calls for special duty nurses as well as hospital personnel. Previously this task had been performed at the city's larger hospitals, but during the busy war years it was just not possible for nurses at the hospitals to take time for this service.

Many alumnae, members of the General Association, and graduates from other cities, took refresher courses at the General and went back to work to relieve the pressure brought on by the shortage of nurses. The alumnae, with the help of the undergraduates, also held rummage sales, teas and "jams sales" to raise money for the bombed civilian nurses' fund.



Modern Chemistry Class Room

Graduates from the General answered the call for nurses in the armed services with thirty girls serving overseas and an additional thirteen serving in Canada.

A minor change, in comparison with the major adjustments which had to be made by all nurses during the war years, was the modified school uniform brought about by wartime shortage of material. The starched aprons and blue dresses of the undergraduates were replaced by plain white dresses, with a Calgary General Hospital crest on the sleeve.

In 1945 Peace came again to the world - except the General Hospital. Like human beings everywhere, who serve uncomplainingly and steadfastly during a crisis, only to come cranky when the crisis is past, the rumble of fatigue and irritability began to be heard from everyone connected with the hospital.

Doctors and nurses had put up with lack of space and poor facilities in the past, hoping the overcrowding was a war time inconvenience, and that things would soon "go back to normal". Instead, Calgary continued to grow and there simply was no enough hospital space to begin to handle the people who needed treatment. Calgary doctors and members of the General Hospital Alumnae Association began to bombard citizens, via the press and radio, with word of the dangerous lack of hospital space and modern equipment.



Student Uniforms of 1920

Spokesmen from the medical and nursing professions assured Calgarians that they could not be given proper care in the existing circumstances. Patients were having to wait for operations. Even emergencies could not be admitted because there were no beds. Modern medical advantages, such as psychiatric service, occupational and physiotherapy and rooms for immediate post-operative treatment were non-existent.

In the meantime graduates and undergraduates in the hospital also seemed to catch the post-war disease of fatigue and dissatisfaction. Although the war was over many nurses were going out of the armed services into post-graduate courses and it was difficult to get graduates for the hospital staff. Graduates and students alike were overworked. Supervisors, including the superintendent of nurses, were working without needed assistants, and it was almost a full year before more graduates could be found. The student nurses catching the "strike bug" which was so much in evidence immediately after the war, sent an irate petition to the Hospitals Board. As a result they were granted an increase in their allowance, a day off each week, and the promise of an eight hour day when more graduate nurses could be found.

As the hospital got "back to normal" and many minor difficulties were ironed out, it became increasingly evident that the cry for more hospital space expressed a real need. For the first time in nearly forty years, Calgarians began to realize that the old practice of adding to their hospital in bits and pieces was not going to solve the desperate situation. Talk was now of a complete new hospital, either on the same site as the old General or in a new, more central location.

While the problem of where to build a new hospital and how to finance it was still being threshed out in the City hall, a more immediate crisis to the nursing service occurred. In 1948, Miss Connal, instructress for twenty five years, resigned because of ill health. Her assistant Miss K. Methelal appointed during the war also resigned to enter mission fields in India and the hospital authorities were faced with the problem of restaffing a department which had been running smoothly under one competent head for a quarter of a century. From that year until the reorganization of the nursing service in 1952 served Miss K. Methelal as the difficult task of chief instructress.



Student Uniforms of Today

## FORTY HOUR WEEK ARRIVES

In 1949, despite continuing shortages of nurses, graduate nurses were put on an eight hour five day week. Three tours of duty, from seven in the morning to three in the afternoon, three to eleven, and eleven to seven, replaced the old seven to seven "shift." The shorter work week, which followed the trend in almost all post-war industry, was a mixed blessing to the hospital nursing staff. Nurses had been none too plentiful, before and now with only a handful of replacements, available nurses had to be spread even thinner than before. A severe outbreak of poliomyelitis in 1951 meant that every available graduate was employed at the Isolation hospital, and there were none left over to relieve the pressure at the General's main hospital.

A further personnel crisis occurred in 1951, when Miss Anna Hebert, superintendent of nurses for eleven years, resigned her position after thirty six years of service to the General. Miss Margaret Macdonald stepped into the difficult position of acting superintendent in the overcrowded, understaffed hospital.



Graduation Uniform of 1920

It was in the next year that difficulties among the nursing staff at the General were most marked. For the outsider to understand the "crisis" which occurred in 1952, when eighty-two of the eighty-three graduate nurses on the staff handed in their resignations, he must take a look at the changes which had taken place in the practice of nursing over a very short time.

Although to the layman, the greatest change in hospital care during the last fifteen years in the use of modern "wonder drugs", as well as new scientific methods in X ray, physiotherapy and other developments, to the nursing service it was the effects of these, that is a shorter hospital stay of patients which had been the greatest single factor in changing hospital procedure.

Up to and during the early war years patients admitted to hospital for major operations stayed two or three weeks, sometimes a month. Maternity cases were hospitalized for two weeks at least, longer if complications occurred. Not only did students and graduates learn to know each patient, but the task of admitting and discharging patients was easily handled by the head nurse of each ward, who filled out the patients' charts when they were admitted or discharged from the hospital. The turnover, in those days, even when the hospital was crowded, rarely exceeded more than one or two patients in any ward each day.

## EARLY AMBULATION

When hospital space became really critical, the only solution was to send patients home the very minute they were able to leave the hospital. Fortunately modern research showed that early ambulation after operations was most beneficial to the patient, and that those who "got onto their feet" soon after an operation seemed to be in less danger of developing circulatory or other complications. Maternity patients as well seemed to progress as favorably when they moved around early, and short hospital stays became the order of the day.

As a result, patients came and went in dozens. A patient who had a gall bladder operation, for example, who would previously have been hospitalized for two or three weeks was now ready to leave in a few days. Head nurses found that completion of charts for patients leaving and entering wards took hours rather than minutes.

Another result of the faster turnover was that nurses were no longer looking after a large proportion of convalescent patients. Every patient in the hospital, with the exception of those with chronic ailments, was a patient in immediately critical stages of illness, and required the most skilled and detailed care a nurse could give.

These factors were subtle ones and it was difficult for the Hospitals Board, or even the doctors in the hospital, to understand that nurses were under a real strain that could only be relieved under completely reorganized service.





*Graduation uniforms of today*

The General hospital building, termed obsolete for twenty years, also provided a host of irritations which were a prime cause of unrest which came to a head in the nurses' complaints to the board. Chief among their requests was the demand for more staff and an appeal to have the superintendent of nurses made a member of the hospitals Board. In this last request is seen another gradual change in nursing that had been coming into force for some years, even though it came as a surprise to the administration that nursing services had become too complex to be administered completely "from above". With new responsibilities and duties and many more nurses on staff in the hospital, it was felt by the nurses that more authority should be vested in those in charge of nursing personnel.

The Hospitals Board granted many of the nurses' requests, with the exception of giving the superintendent of nurses a place on the hospitals board.

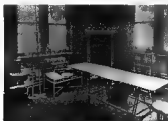
Miss H. M. Lamont, superintendent of nurses at the Royal Victoria Hospital in Montreal, conducted a survey of the nursing situation at the General. She scolded the nurses complaints in a formal report. Her chief criticisms were lack of planning and lack of supervision as well as an inadequate staff. She also stressed the need for more authority for supervisory nurses.

It was agreed by most people concerned that these shortcomings were largely the result of years of overcrowding and shortage of staff, when administrators, bearing in mind that the patient's comfort must come first, had simply not had time to adjust outmoded organization to meet modern needs.

With the new hospital nearing completion, the board was convinced that, not only the new building, but a whole new organization was needed to direct the General's nursing service and education. Even more important than the change in the attitude of the Hospitals Board was the realization by the people

of Calgary that nursing services could not be run "on a shoestring" with student nurses put into maximum service to balance the budget. The board and administrators of a publicly supported hospital are the servants of the public in whose hands the responsibility ultimately lies to provide and finance adequate hospital care.

Mrs. Edith Henry, A General graduate of 1930, and at that time supervisor of the Isolation Hospital, was asked to come to the General to "fill in" as acting superintendent of nurses until a new administration could be appointed.



Operating Room 1926

The hospital's new medical administrator, Dr. L. O. Bradley, arrived in Calgary in September 1952. A graduate of the University of Alberta, Dr. Bradley was formerly executive secretary of the Canadian Hospital Council and also editor of the "Canadian Hospital" journal.

Miss Gertrude Hall, graduate of the Winnipeg General Hospital, and of the graduates school of nursing of McGill University, was appointed to the new position of Director of Nursing. Prior to taking over her new position, Miss Hall had been National Advisor of Nursing and General Secretary of the Canadian Nurses Association. With a wide background in both hospital and public health nursing she undertook the difficult task of completely reorganizing the Calgary General's nursing service and its nursing school, in preparation for the transformation of the old, three hundred bed hospital into a new unit which would be more than doubled in size.



Operating Room Today

Under Miss Hall's leadership a firm policy was drawn up in the form of a stated "philosophy of the Department of Nursing" to form a framework on which to build a completely new organization. With the firm support and assistance of the Hospitals Board, under the chairmanship of Dr Howard P Wright and Dr Bradley, this policy was acted upon so completely that in three short years the nursing service at the General has changed more completely than it did in the whole sixty years of its previous history.

The nursing department's two separate functions, provision of nursing care for patients, and education of student nurses, were dealt with separately, with each given a complete renovation unrivalled even by the changes in the new modern hospital.

First, it was felt that, with regard to patient care, the day had gone forever when student nurses could be made responsible for the bulk of nursing care. Specialized nursing care should be given by graduates rather than "apprentices."

A second point was adherence to internationally recognized standards of staffing for adequate patient care. By consulting the hospital records in regard to the number of hours of bedside care required by each patient, it was possible for the administrators to determine how many graduate nurses, nursing aides and ward clerks would be needed to staff each ward.

## POST GRADUATE TRAINING

The "good nursing principle" does not stop merely at quantity of nurses, but embodies quality as well. Because the poor are subject to the same ailments as the wealthy, it was felt that no patient should have to engage a special nurse to obtain specialized care. In order that the regular staff would include nurses who were familiar with the latest techniques in every field, a new trend was begun to send nurses from the General to the finest medical centres in North America for post graduate special courses. To date nurses have taken post graduate courses or observation tours in neurosurgical nursing, neurological nursing, operating room nursing, emergency nursing, Central Supply, orthopaedic and rehabilitation nursing, proctology, obstetrical nursing, clinical teaching, nurses' residences, and organization and administration of team nursing.

Financial assistance for these education projects was given by the General Hospital Alumnae Association, Professional Training Grants (Federal and Provincial), the Calgary Branch of the National Council of Jewish Women, the Canadian Legion Polio-myelitis Foundation and two Calgary chapters of the Imperial Order Daughters of the Empire.

As each nurse returned from these specialized courses, her information was passed on to other nursing personnel and every effort was made to put new methods into practice. The result was a direct improvement in nursing care as well as stimulated interest in post graduate education among the entire nursing staff.

In this way, the Nursing Department was ready for the opening of the new hospital with hundreds of nursing service personnel recruited from all over Canada, ready to be placed on tours of duty in wards best suited to their training and experience.

## CHANGES IN SCHOOL OF NURSING

As for the education of student nurses, the department's philosophy was as definite, and the resulting action as prompt, as were the changes to the administration of the nursing staff.

A hospital which conducts a School of Nursing assumes the responsibility for giving students an education which will "prepare them to become professional nurses able to meet the needs of society in the world of today." Therefore students, must be treated as students, not as basic hospital staff.

On the other hand, because students do not pay fees, they are under an obligation to make a fair return to the hospital, in service, for the education and maintenance they receive. This service must be regarded as clinical experience and it must be obtained where it will have educational value to the student as a learner.

It is easy to see that this concept requires a tremendous amount of organization to make sure that clinical experience in the wards is correlated with classroom work. In order to do this classes had to be repeated more often and a master plan of clinical experiences was drawn up which covered the entire three years' educational programme. The task of co-ordinating lectures and nursing experience was undertaken by Miss Alken, who is directly in charge of the nursing school, and Miss Street, who planned the rotation for clinical experience and placement of the students in the wards.

Another important concept laid down in the department's philosophy, was that education for nursing "should be toward personal growth as well as professional development." In practical application this belief resulted in the appointment of a social and recreational director to help students choose the leisure time activities which would prevent the walls of the hospital from becoming the horizons of their world during their years in Nursing School. Students were encouraged to find other objects than "shop talk" to occupy their spare time, and real evidence of broader interests as seen in the request, before the recent provincial election, to have all political candidates address a meeting of the young nurses, many of whom were about to vote for the first time.

The student's association was also organized to have the students take more responsibility for their activities and discipline.

A new curriculum was drawn up for the nursing school. For the first time lectures were made part of the students' eight hour day. Classes were no longer considered "time off" activity which had to be fitted in after a full day's tour of duty in the wards.

New courses were included in the lecture program to coincide with additional clinical experiences the students would have in the new hospital. These included Central Supply, eye, ear, nose and throat, and psychiatric, neurosurgical, urological and emergency nursing.

## AFFILIATIONS WIDENED

The Nursing School also broadened its scope with additional hospital affiliations. Students were now able to receive part of their nursing education at the

Provincial Mental Hospital at Ponoka, the Baker Memorial Sanatorium and the Alberta Red Cross Crippled Children's Hospital, in addition to the existing affiliations with the city health department and the Victorian Order of Nurses.

Another important affiliation was with the Faculty of Nursing at the University of Alberta. With an additional two years study at the University, Calgary General Nursing School graduates were able to qualify for the Bachelor of Science in Nursing degree.

With a heavier curriculum and the necessity for repeating classes in the rotation plan, it became evident the busy head nurses could not be made responsible for teaching in the wards. More clinical instructors were appointed, and other new faculty members included instructors in Nursing Arts and Nursing Science, a librarian and four assistant supervisors to help the resident director.

To make sure that students would learn to give the finest quality of nursing care, both head nurses and instructors were encouraged to secure advanced university education. As a result of this policy, many of the faculty have now completed university work to return to the nursing School with a broader knowledge.

#### OPENING OF CALGARY GENERAL HOSPITAL IV

When the hospital was officially opened in March 1953, a guest of honour at the opening ceremonies was the hospital's first graduate, Miss Moodie, who attended the ceremony in a replica of the uniform she wore more than fifty years before on her graduation day. The new uniform of current student nurses was a sharp contrast to the old black boots and high collar worn by Miss Moodie. The new "regulation garb", designed with the help of the students, is a blue and white checked gingham, short sleeved dress with white apron and belt.

The four days following the official opening were busy ones for the Alumnae Association who undertook to conduct the public on sight seeing tours through the building.

Headquarters for the nursing school in the new hospital were on the seventh floor. Additional facilities were made available in the old building, where a practice ward was set up on the third floor and the old students' cafeteria was used for a demonstration room. These changes left empty the large lecture hall erected during the war. With the money willed to the hospital by the late W. R. Hull, the lecture hall was moved to the rear of the hospital, decorated in a soft shade of Wedgewood blue, furnished with bright cretonne covered easy chairs and chesterfields, and christened the "Blue Room". This attractive new sitting room for student nurses has since been the scene of informal evenings, teas, dances, meetings and concerts.

Soon after the last sight seer had seen the wonders of the new hospital, the staff began the task of moving patients, first to the East Wing, and later to the West wing, bringing the new General up to a capacity of six hundred and twenty-six beds. When the Isolation ward was opened, the Isolation hospital closed its doors, marking the end of an era in General Hospital history.

The noise of riveting machines and hammers had hardly died away, when painters and decorators moved into the old building to do a face lifting job to

convert the old General into a temporary residence for student nurses and administrative staff.

Early in 1953, more changes were made in the nursing school. It was decided to admit one large class each fall, rather than two classes a year, as had been done in the past. The old system of six months probationary period came to an end the next year. It was decided that Nursing School administrators would decide upon students' qualifications before they were accepted, and provided they could meet the school's requirements throughout their course, there was to be no question of having to serve a trial period before being finally accepted. As a result, the old "capping ceremony" also became a thing of the past. In 1954, every student nurse was allowed to wear a cap from her first day in the nursing school. Students in their second year wore a pale velvet band on their caps, with a royal blue velvet band added during the third year. It was also in 1954 that another traditional part of the uniform of student nurses became history at the General school. Black shoes and stockings were discarded and all students were allowed to wear "whites."

## NEW NURSING SCHOOL AND RESIDENCE

One tradition at the General remained in the new hospital—the old familiar cry of "no room." It was evident, almost from the opening of the new nursing school in the new hospital that facilities, both for nurses' residence and classrooms, were quite inadequate. In the fall of 1953 a bylaw was passed by the people of Calgary authorizing the building of a complete new unit to house both the nursing school and a residence.

Every effort was made in drawing up the plans for the new building to make the unit adequate for every future need and to provide full accommodation for a school which would be increased to three hundred students. Many consultations between architect and nursing department administrators were held, and studies were made of the best nursing schools on the continent. The result is a school and residence, as up-to-date, and as attractive as any in North America.

The school, which occupies the East Wing of the unit, was opened in 1955 for the fall class. For the first time, teaching facilities are all in one unit, which is connected to the main hospital by an underground tunnel.

On the ground floor is a classroom equipped with a revolving platform for demonstrating nursing. Two thirteen bed practice wards are exact replicas of hospital wards (except for the number of beds) even medicine rooms, nursing stations, kitchens and laundry carts. The large conference room reflects the change in the nursing school faculty, which is now far too large to have policies and practices "discussed over lunch." The nursing school offices are also on the first floor, as well as much needed cupboards for stationery and supplies.

The second floor houses one large and two smaller classrooms, a science laboratory and a library. The decoration throughout the building is also a far cry from the drab classrooms of the old days. The pastel walls of the classrooms, as well as the mahogany panelling in the library, will all add to more pleasant working conditions for students and faculty.

The new residence, to be opened in 1956, will provide every facility for a well-rounded, extra-curricular student program. Girls will live in private rooms, each furnished with a desk, dressing table, chair, closet and sink. A combined gymnasium and auditorium with modern stage will be available for athletics as well as amateur dramatics and miscellaneous programs. A formal, sunken lounge and a large recreation room as well as smaller lounges for entertaining friends, are also under construction. Furnishing of the small chapel at the east end of the building is the School's Alumnae's current project.



Transportation To Hospital in Old Days

To those used to the "old ways", the new General may appear to be all change with no regard for the past. But, as far as the nursing service is concerned, there is much to be salvaged from all the old buildings which preceded Calgary's modern hospital.

There is a solid base for the broader, more specialized and more highly organized nursing service and school needed to meet today's demands on the professional nurse. This foundation was gradually laid at all the cramped, uncomfortable "old Calgary Generals" where nurses and students, "operating on a shoestring", established sound qualities of good bedside care and were instilled with a devotion to duty which is part of the hospital's tradition.







